State Program Standing Committee April 17, 2014 208 Hurricane Lane, Williston

Members present: Emily Anderson, Linda Berger, Bethany Drum, Nicole LeBlanc, Greg Mairs, Kyle Moriarty, Edwin Place, Theresa Wood, Connie Woodberry, and Susan Yuan

Members absent: Anne Bakeman, Max Barrows, Julie Cunningham, Joe Greenwald, Barbara Prine

Staff & Guests: June Bascom, Nancy Breiden, Camille George, Lisa Martel, Lisa Maynes, Betty Milizia, Kirsten Murphy, Tina Royer, Marlys Waller, Susan Wehry, and Karen Wynkoop

Added Agenda Items:

• If there is time: Update on the Department of Labor Companionship Rule, update on the Centers for Medicare and Medicaid Services (CMS) new Home- and Community-Based Services (HCBS) rules and how they apply to VT and in what way

Minutes: The March minutes were reviewed. A motion was made by Bethany Drum to accept the minutes with a correction (on page 2 change DOC to DDC). Nicole LeBlanc seconded the motion. Motion passed to accept minutes as amended.

Announcements:

On June 5th, in Massachusetts, there will be a summit regarding parents with disabilities.
 Scholarships are available for parents who wish to attend. There will be a small fee for registration— contact Susan Yuan for more information. (Susan will try to send the link for details to Tina to send out to the SPSC).

Membership: Connie Woodbury recommended those members up for re-appointment to re-apply for membership. The five members up for re-appointment are: Julie Cunningham, Gregory Mairs, Edwin Place, Barbara Prine and Theresa Wood. Susan Yuan motioned to recommend the candidates to the Commissioner, Nicole LeBlanc seconded the motion. The motion passed unanimously.

Accountable Care Organization (ACO):

- A letter was drafted by the DS Imagine the Future Task Force about Vermont's health reform
 activities, including the development of Accountable Care Organizations (ACOs). Theresa
 Wood shared the draft letter from the Task Force with members of the SPSC and would like to
 get their input before it is sent on. Time will be allotted for this at the end of the meeting.
 While waiting for Commissioner Wehry to arrive at the meeting, Nancy Breiden provided a brief
 description of what an ACO is and how they are developing in Vermont. Nancy explained that
 ACOs are one part of health care reform. ACO's are made up of a partnership of providers who
 work to better coordinate services. The goals are: better health for people, better care and
 lower costs. Providers for the ACO include: hospitals, mental health providers, home health,
 and physicians.
- Commissioner Susan Wehry joined the group to discuss health reform. She asked the group, "How do you see the ACO's?" There are currently three ACO's, possibly four. Originally, ACO's started as a Medicare payer (there is one Medicare ACO in Vermont). Now, Vermont is establishing Medicaid ACOs. There are currently 2 Medicaid ACO's: One Care (MD and Hospitals), and Health First (we believe this to be the name, they are a physician group). There may also be a third or more in the future. Currently, 43% of Vermonters are enrolled in ACO's.
- As noted before, ACO's goal is better care, better health for people for lower costs. This plan would reward quality vs quantity. The state would like to do what the federal government did with Medicare, but with Medicaid. Currently, payment will continue in the old way fee for

service. But, by saying to them, "in changing the way you work, if you save money, and reduce costs; we'll let you share in the savings." At this point, it's a shared savings plan.

- Questions: is this a model that has been used in other states yes for Medicare; just getting started for Medicaid.
- What happens when there is no more savings? The incentive is better quality of care. If you are rewarded for quality, you would keep doing this to get paid. It's not enough to keep doing it; you have to do it well.
- o If you have a primary care physician, and they are a member of the ACO, will they notice anything different being a member? No.
- o Who gets the savings? Participating providers get to share in the savings.
- o Can providers sign with more than one ACO? Yes
- Who's paying for the ACO's? Currently, the state innovation grant is paying for the ACO's.
- Unintended consequence of ACO is to move people out of hospitals too quickly. Find a way to make it a disincentive to do this.

DDS State System of Care Plan (SOCP): Camille George provided an update on some of the possible directions the State is thinking about going with the next 3-year SOCP (FY 15 – 17). The current challenge is finding ways to be creative and to address some of the ideas and input already received even though no one anticipates there will be additional funds. The State is looking at one funding priority in particular: expanding the employment priority for high school graduates to a broader group of transition age youth up to age 26. Other areas for future focus in the SOCP will include: Integrated Family Services, Health Reform and the new Centers for Medicare and Medicaid (CMS) Home- and Community-Based Rules

Specifically on the topic of broadening the funding priority on employment for transition age youth, Camille asked the committee if they have any ideas or thoughts on this:

- Some felt that only a moderate number of people would come in under that.
- Generally would find a way to fund these people under a different funding priority like risk to health and safety.
- Not that much of an increased cost
- Look at June grads data vs those applying to determine how many people this would mean
- People covered under Vocational Rehabilitation (VR) grant
- Has the potential to change role of special education
- Some were worried that a change like this would decrease the incentive for schools to help graduating students get jobs; however, others did not think this would happen at all, since the Agency on Education puts clear expectations on schools around this.
- There was general support for looking at how the SOCP can better support transition age youth.

At this time the Department staff members exited the meeting. The committee continued discussion on the *Imagine the Future Task Force* draft letter regarding ACO's. After discussion, Susan Yuan moved to ask the SPSC chair to draft a letter endorsing the *Imagine the Future Task Force* letter on ACO's; Connie Woodberry seconded; passed unanimously.

Meeting adjourned: 12:30pm